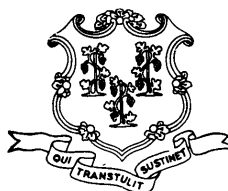


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION
 Telephone: (860) 713-6145
 Email: occprotrades@ct.gov
 Web Site: www.ct.gov/dcp



For Official Use Only

APPLICATION FOR JOINT PRACTICE OF ARCHITECTURE, PROFESSIONAL ENGINEERING & LAND SURVEYING

This application **must be accompanied with a check or money order in the amount of \$565.00 made payable to "Treasurer, State of Connecticut."**

Please check (✓) the license type you are applying for:

- ☐ **Joint Practice of Architecture & Land Surveying**
☐ **Joint Practice of Architecture & Professional Engineering**
☐ **Joint Practice of Architecture, Professional Engineering & Land Surveying**
☐ **Joint Practice of Professional Engineering & Land Surveying**

Name of Corporation or Limited Liability Company			
Street Address		City	State
Telephone Number (with area code)		FEIN	Email Address
Mailing Address (if different from above)			
Street Address		City	State
State of Incorporation	If a "Foreign" Corporation or LLC, do you have a Certificate of Authority from the Secretary of State of the State of Connecticut? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has the applicant or any of the directors, officers, members or managers been convicted of a felony crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach a statement providing the dates(s) of conviction(s), the court(s) where the cases were decided and a description of the circumstances relating to each conviction(s).			
Indicate Organizational Structure: <input type="checkbox"/> Corporation <input type="checkbox"/> Professional Corporation (PC) <input type="checkbox"/> Limited Liability Company (LLC)			

FOR CORPORATION, PROFESSIONAL CORPORATION OR LIMITED LIABILITY COMPANY

List the names, addresses and titles of all directors, officers, managers or members

Name	Address	Title	CT License Number
Name	Address	Title	CT License Number
Name	Address	Title	CT License Number
Name	Address	Title	CT License Number

HOLDERS OF VOTING STOCK OR VOTING INTEREST

Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number
Name	Address	Voting Shares	CT License Number

TOTAL VOTING SHARES ISSUED _____

LIST ALL PERSONNEL IN RESPONSIBLE CHARGE WHO ACT ON BEHALF OF THE CORPORATION OR LLC AS A PROFESSIONAL ENGINEER, ARCHITECT OR LAND SURVEYOR WHO HOLD CONNECTICUT LICENSES

Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number

I, the director or officer of the corporation or member or manager of the limited liability company on behalf of which the above application is made, being duly sworn according to law depose and say the answers above set forth are true to the best of my knowledge and belief and that this application is made for the purpose of inducing the issuance of the registration requested.

Signature

Title

Date

Subscribed and sworn to before me this _____ day of _____ 20_____

Signature of Notary Public

Date

My Commission Expires

INSTRUCTIONS

- 1) The application must be completed and submitted with the application fee of **\$565.00** made payable to ***“Treasurer, State of Connecticut.”***
- 2) Persons licensed as architects, professional engineers, or land surveyors must own not less than two-thirds of the voting stock or voting interest of the corporation or limited liability company.
- 3) Each profession must own a minimum of twenty percent of the voting stock or voting interest of the company.
- 4) Attach a **Certificate of Good Standing** or **Authority** from the State of Connecticut (the form may also be known as “Certificate of Legal Existence”) which you must obtain from the:

Office of the Secretary of State
Telephone: (860) 509-6002
Web Site: www.sots.ct.gov

- 5) Return the completed original application and fee to the:

**Department of Consumer Protection
License Services Division
165 Capitol Avenue
Hartford, CT 06106**